Page 1 of 2

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10018842-1

As a below named inventor, I hereby declare that:

Rev 06/01 (DecPwr)

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMPUTER SYSTEM WITH BACKUP MANAGEMENT FOR HANDLING EMBEDDED PROCESSOR FAILURE

the specification of	which is att	ached hereto unless th	e following box is o	checked:	
() was filed on	as US Application No. or PCT International Application				
Number	•••				
ncluding the claims,	, as amend	ewed and understood ed by any amendment material to patentabil	(s) referred to above	e above-identified specification ve. I acknowledge the duty t CFR 1.56.	
Foreign Application(s) and	d/or Claim of F	oreign Priority			
nventor(s) certificate liste	ed below and I	under Title 35, United State have also identified below a on on which priority is clain	ny foreign application for	any foreign application(s) for patent or patent or inventor(s) certificate havir	
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119	
				YES: NO:	
			***	YES: NO:	
Provisional Application					
hereby claim the beneficelow:	t under Title 3	5, United States Code Sect	ion 119(e) of any United	d States provisional application(s) list	
	1	APPLICATION NUMBER	FILING DATE		
J. S. Priority Claim					
nereby claim the beneti nsofar as the subject ma nanner provided by the f nformation as defined in	atter of each o first paragraph Title 37, Code	f the claims of this applicat of Title 35, United States of Federal Regulations, Sec rnational filing date of this a	ion is not disclosed in th Code Section 112, I ack tion 1.56(a) which occu	ne prior United States application in t	
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(Use Page Two For Additional Inventor(s) Signature(s))

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10018842-1

	Full Name of # 2 joint inventor:	Michael John Erickson	Citizenship: United States			
	Residence:	1507 Melissa Drive, Loveland, Colorado	80537			
	Post Office Address:	1507 Melissa Drive, Loveland, Colorado 80537				
	Inventor's Signature	Date				
	Full Name of # 3 joint inventor: Paul J. Mantey Citizenship: United States					
	Residence:	5212 Greenview Drive, Ft. Collins, Color	ado 80525			
	Post Office Address:	5212 Greenview Drive, Ft. Collins, Colorado 80525				
	Inventor's Signature					
	inventor 5 Signature	Date				
	Full Name of # 4 joint inventor:	:	Citizenship:			
####	Residence:					
L.	Post Office Address:					
The state of the s	Inventor's Signature	Date				
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THE PERSON NAMED IN	Full Name of # 5 joint inventor	:	Citizenship:			
	Residence:					
8	Post Office Address:					
	Total office Addison.					
Harm American	Inventor's Signature	Date				
hail fall	Full Name of # 6 joint inventor	ri	Citizenship:			
	Residence:					
	Post Office Address:					
	Inventor's Signature					
	a alangemen	Date				
	Full Name of # 7 joint inventor	_	Citizenship:			
	Residence:	r:	Citizensii <mark>p.</mark>			
	Post Office Address:					
	Inventor's Signature	Date				
	Full Name of # 8 joint inventor	r:	Citizenship:			
	Residence:					
	Post Office Address:					
	Inventor's Signature	Date				